First named inventor GOFFER, AmitDocket 01345-GOFFER #3

Saltamar Innovations

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Declaration for Patent Application

(37 CFR 1.63)

(Foreign Agent Involved)

Application Number 09/864,845Filing Date 05/24/2001Group Art Unit 3764

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

GAIT-LOCOMOTOR APPARATUS

the specifications of which

☒ is attached hereto.

☒ was filed on 04/24/2001 as United States Application Number or PCT Application Number 09/864,845
and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application on which priority is claimed.

Priority NOT claimed Copy attached

_____ (Number)	_____ (Country)	_____ (DD/MM/YYYY Filed)	<input type="checkbox"/>	<input type="checkbox"/>
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_____ (Number)	_____ (Country)	_____ (DD/MM/YYYY Filed)	<input type="checkbox"/>	<input type="checkbox"/>
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☐ Additional foreign application numbers are listed on a supplemental priority data sheet

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s), or § 365 (c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

_____ (Application Number)	_____ (Filing Date)	_____ (Status)
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_____ (Application Number)	_____ (Filing Date)	_____ (Status)
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☐ Additional US or PCT international application numbers are listed on a supplemental priority data sheet

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional applications listed below.

Application Number(s)

Filing Date



Additional provisional application numbers are listed on supplemental priority data sheet attached hereto

Power of Attorney and instruction Authorization

I hereby appoint Mr. Shalom Wertsberger of the firm Saltamar Innovations, Reg. No 43,359 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

I hereby authorize Shalom Wertsberger to accept and follow instructions from _____ as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorney or agent and the undersigned. In the event of a change in the persons from whom instructions may be taken, the U.S. agent named herein will be so notified by the undersigned by registered mail directed to:

**Shalom Wertsberger
Saltamar Innovations
30 Fern lane
South Portland, ME 04106**

Address all telephone calls to: (207) 799-9733

Address all facsimile inquiries to: (207) 799-3698

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief am believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full name of sole or first named inventor (given name, family name) Amit GOFFER


(Inventor Signature)

05/22/2001
(MM/DD/YYYY Date Executed)

(Residence [town, state])

Israeli

(Citizenship)

1, Ha'seifan st., Kiryat Tivon, 36531

(Post office Address)

Full name of second or joint named inventor (given name, family name) _____

(Inventor Signature)

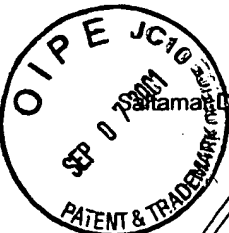
(MM/DD/YYYY Date Executed)

(Residence)

(Citizenship)

(Post office Address)

☐ Additional inventors are being named on _____ sheets attached hereto

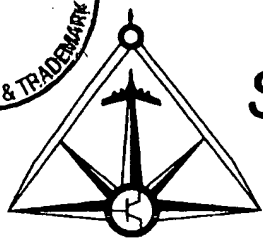


Saltamar Docket

0113US-Goffer

Representing Firm Docket

1436/0



Saltamar Innovations

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Phone: (207) 799-9733
Fax: (207) 228-3694
e-mail: shalom@saltamar.com

Power of Attorney

Invention Title Gait Locomotor Apparatus

☒ Application Number 09/864,845 Filing Date May 24 2001

or

☐ The patent application whose specifications are attached herewith.

I, Amit Goffer Residing in Kiriat Tivon, Israel, as

☐ Inventor

☒ Assignee of record, or officer of assignee organization

do hereby appoint Shalom Wertsberger, Reg. No. 43, 359, of the firm Saltamar Innovations as an attorney of record with full power of substitution and revocation, to prosecute this application and transact all business in the United States Patent and Trademark Office, connected therewith.

Direct all communications to:

Shalom Wertsberger
Saltamar Innovations
30 Fern Lane
South Portland, ME 04106
Phone: (207) 799-9733
Fax: (207) 228-3694

Assignee Name Argo Medical Technologies LTD.

Signatory
name and Title Amit Goffer, Director

Address 1 Mishol Hasaifan

Address Kiriat Tivon 36531, ISRAEL

Signature

Date

Aug. 28 2001

Instruction Authorization

The undersigned hereby authorizes Mr. Shalom Wertsberger, of the firm Saltamar innovations to accept and follow instructions from Doron Sieradzki or Yosef Miller of the firm Miler Sieradzki

as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between Mr. Wertsberger and the undersigned. In the event of a change in the persons from whom instructions may be taken, Mr. Wertsberger will be so notified by the undersigned by registered mail.

Name Amit Goffer

Signature

**RECORDATION FORM COVER SHEET
PATENTS ONLY****TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copies****Submission Type**

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Conveying Party(ies)☐ Additional names of conveying parties attached on ___ supplemental sheetsExecution Date
Month Day YearName (line 1) **Amit Gofer****06/28/2001**Name (line 2) **Second Party**Name (line 1) Execution Date
Month Day YearName (line 2) **Receiving Party**☐ Mark if additional names of receiving parties attachedName (line 1) **Argo Medical Technologies, LTD.**☒ If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative is attached. (designation must be a separate document from Assignment.)Name (line 2) Address (line 1) **1 Seifan Street**Address (line 2) Address (line 3) **Kiriat Tivon****Israel****36531**

City

State/Country

Zip Code

Domestic Representative Name and Address

Enter for the first Receiving Party only.

Name **Shalom Wertsberger**Address (line 1) **30 Fern Lane**Address (line 2) **South Portland, ME 04106**Address (line 3) Address (line 4) **FOR OFFICE USE ONLY**

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Mail documents to be recorded with required cover sheet(s) information to:
Commissioner of Patents and Trademarks, Box Assignments . Washington, D.C. 20231

Correspondent Name and Address

Area Code and Telephone Number (207) 799-9733

Name Shalom Wertsberger

Address (line 1) 30 Fern Lane

Address (line 2) South Portland, ME 04106

Address (line 3)

Address (line 4)

Pages

Enter the total number of pages of the attached conveyance document including any attachments.

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1

Application Number(s) or Patent Number(s)

☐

Mark if additional numbers attached

Enter either the Patent Application Number or the Patent Number (DO NOT ENTER BOTH numbers for the same property).

Patent Application Number(s)

Patent Number(s)

09/864,845

If this document is being filed together with a new Patent Application, enter the date the patent application was signed by the first named executing inventor.

Month day Year

Patent Cooperation Treaty (PCT)

Enter PCT application number

PCT

PCT

PCT

only if a U.S. Application Number PCT
has not been assigned.

PCT

PCT

Number of Properties

Enter the total number of properties involved.

#

1

Fee Amount

Fee Amount for Properties Listed (37 CFR 3.41): \$

\$40.00

Method of Payment:

Enclosed ☒Deposit Account ☐

Deposit Account

(Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number:

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501392

Authorization to charge additional fees:

Yes

☒

No

☐

Statement and Signature

To the best of my knowledge and belief the foregoing information is true and correct and any attached copy is a true copy of the original document Charges to deposit account are authorized, as indicated herein.

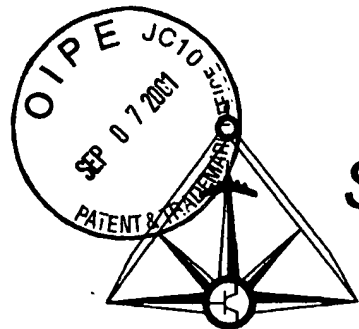
Shalom Wertsberger

Name of Person Signing

Signature

September 03, 2001

Date



Saltamar Innovations

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Fax: +1(207) 228-3694
e-mail: Shalom@saltamar.com

Docket 0113US-Goffer

Domestic Representative Designation - Foreign Assignee

Application Title Gait -Locomotor Apparatus

Filed on May 24 2001 Application Number 09/864845 Executed on _____

I hereby authorize and request Mr. Shalom Wertsberger, Reg. # 43,359, of South Portland ME, USA to insert hereabove the filing date and application number of said application when known.

As a bellow signed assignee, I do hereby designate Mr. Shalom Wertsberger, Reg. # 43,359 as a domestic representative in accordance with 37 CFR 3.61, to represent me in the United States Patent and Trademarks Office. I hereby request that all process or notice of proceedings affecting the above identified application, patents stemming therefrom, or registration or rights thereunder be directed to:

Mr. Shalom Wertsberger
Saltamar Innovations
30 Fern Lane
South Portland, ME 04106

Please direct all telephone inquiries to: (207) 799-9733

I do hereby appoint Shalom Wertsberger of the firm Saltamar Innovations, as an attorney of record with full power of substitution and revocation, to prosecute this application and transact all business in the United States Patent and Trademark Office, connected therewith.

I hereby authorize Mr. Wertsberger to accept and follow instructions from the Representing Agent named below, as to any and all actions regarding the patent application identified above, or to any patents or patent applications related thereto, without direct communications between Mr. Wertsberger or Saltamar Innovations and myself.

In the event of a change of the person or firm from whom instructions may be taken, Saltamar Innovations shall be notified by the undersigned inventor by registered mail to the address indicated above.

Representing Agent Name(s): Doron Sieradzki or Yosef Miller

of the Firm Miller Sieradzki

For Assignee

Argo Medical Technologies, LTD.

Signatory Name and
Position

Amit Goffer, Director

Assignee Signature

Date Aug 28, 2001